	Under the Pa	perwork F PATEI	Reduction Ac (TAPPL	torn ICA	<b>295, no pe</b> TION # Upstitute	rsons TEE	are requir DETER	ed to res RMINA	pond is TION	U.S. Pate a collect I REC	ent and ion of it ORD		roved for tark Offici ion unles	s t d	firough 7.5 S. DEPART splays a va lication or	NZOOB MENT BA OMB	TO/SB/0611 OMB 083- OF COME 3 control at Number	2-04) 0032 ROE aber.
APPLICATION AS FILED PART I (Column 1) (Column 2) SMALL ENTITY												v i	··	9.7	OTHER THAN			
1	FOR BASIC FEE		NUMBER FILED			NUMBER EXTRA							<u>.</u> (a) ≡			SMALL ENTITY		
ŀ	(87 OFR 1.16(s), (b), or (c)) SEARCH FEE (87 OFR 1.16(b), (l), or (m))				<del> </del>		<del></del>	4						-1871	= (4)	FEE	4	
1	EXAMINATION FEE (87 OFR 1.16(0), (p), or (q))						-1:1	· .		<u> </u>						$\Box$		
-1	TOTAL CLAMS (37 CFR 1,16(0)		minus 20 =			•		11			<del></del>							
3	INDEPENDENT CLAIMS (37 OFR 1.16(h))		· minus 8 =			4			11	x x		<u> </u>	$\dashv$	OR.	× .	-=		_
ŀ	PPLICATION S EE 17 CFR 1.16(6))	If the specification and of sheets of paper, the apple is \$250 (\$125 for small e additional 50 sheets or fi 35 U.S.C. 41(a)(1)(G) ar				dication size fee due willty) for each			~		· · · · · · · · · · · · · · · · · · ·		· .				1	
М	MULTIPLE DEPENDENT CLAIM PRESENT (57 CFR 1.16(1))										7		$\dashv$	:			<u> </u>	4
*1	_	PLICATI	ON AS AI		•				• • • • • • • • • • • • • • • • • • •	TOTAL	L	•	ゴ	L	TOTAL	t		1
X V	-11-00	REM	mn 1) NMS NNING TER DMENT	· ·	HIG NUI PREVI		Y PRE	lutno 3) SSENT CTRA	Ė	SMA		TITY ADDI- NONAL	7	PR	OTT SMA RATE (\$)	IER TI	ADDI-	
ENDMEN	Total (N. OFR 1.46(I))	7		linus	2	FOR'	=	0	-	25°	∴€	<b>EE</b> (\$)	$\dashv$	-	50 <u>0</u>	-	FEE (\$)	
	Independent (27 OFR 1.16(a))	1.8	2	ilnus .	-	7	= /		xli xli	0000			OR OR	<b>-</b>	200 <u>-</u>	0.	~ ( <del>20</del>	
₹	Application Size Fee (37 CFR 1.16(s))								F		工		] ~	Ê	<u> </u>	18		8-21
	FRET PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 CFR 1.16(0))  TO AD											·	OR OR		OTAL OD'L FEE	+		
<del>.</del>	: ·	(Column		·.,		mn 2)	(Colun	nn 3)	:_					. ~		-		•
	Total	REMAIN AFTE AMENDM	ING R		HIGHE NUMB PREVIOR PAID F	ER USLY	PRES		RA	TE (\$)	TIC	DDF XVAL E(\$)	]	[	RATE (\$)	TI	NDOI- ONAL EE (8)	·
	TOTE LIGHT.  Independent  OFR LIGHT	• •	· Min		***	· ·	=		<u>×</u>	#	-		ÓR	x				:
-	optication Size	Fee (37 C	R 1.16(s))	÷۲		لِـــ	<del></del>	.	X	<b>e</b> ,			OR	x	. =	<u> </u>		
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 OFR 1.16(0))																	

"If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (I ptaid or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, troluding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TOTAL ADD'L FEE

TOTAL . ADD'L FEE